



**Town of Rochester
Recreation Department**

PO Box 65, ACCORD, NY 12404

(845) 626-2115 • FAX (845) 626-0141

RECREATION@TOWNOFROCHESTER.NY.GOV

ASHLEY SWEENEY, DIRECTOR

BETHANY DENNIN/RITA HARKINS, ASSISTANT DIRECTORS

Michael Smith, Sr., Basketball Director

This program does not deny services to participants regardless of race, creed, color, national origin, sex, or disability.

Dear Friend:

It's that time again. Time for kids to get back on the court and play BASKETBALL!

The Town of Rochester is looking for Basketball Sponsors! We need your support and we are hoping that your business will sponsor a Town of Rochester basketball team for \$135. Team tee shirts will display your company name as a sponsor of this great program. We have always been fortunate to have businesses and people like you to sponsor our program season after season. You make it possible for kids who love the sport, to play. We could not do it without your support. The support from sponsors keep our costs down, making it possible to continue this program.

We truly appreciate your community spirit and your dedication to area youth. We look forward to a great basketball season. Hope to see you in the cheering section! The program takes place at Kerhonkson Elementary School and runs from October to March.

Please make your check out to the RECREATION DEPARTMENT and send it to the address above. Thank you in advance for your support.

For a game schedule or more information please call 845-626-2115.

Sincerely,

Ashley Sweeney, Director
Town of Rochester Recreation Department



Town of Rochester Recreation Department

PO Box 65
 Accord, NY 12404
 845-626-2115

Fax: 845-626-0141 Email: Recreation@townofrochester.ny.gov

Ashley Sweeney, Recreation Director

BETHANY DENNIN/RITA HARKINS, ASST. DIRECTORS

Michael Smith, Sr., Basketball Director

This program does not deny services to participants regardless of race, creed, color, national origin, sex, or disability.

YOUTH BASKETBALL SPONSOR FORM

NAME:		
ADDRESS:		STATE: ZIP:
PHONE:	CELL:	WORK:
BUSINESS NAME:		
What name do you want on your team's tee shirts?		

SPONSORSHIP FEE:	AMOUNT PAID:
\$135	

Please return form with your check made out to Recreation Department and send to: Town of Rochester Recreation Dept. PO Box 65, Accord NY 12404